

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TN	1061	10-12-01
RESPONSE FORMALITY REVIEW	KA	1019	03-05-02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	10/12/01
2	✓	✓	10/12/01
3	✓	✓	10/12/01
4	✓	✓	10/12/01
5	✓	✓	10/12/01
6	✓	✓	10/12/01
7	✓	✓	10/12/01
8	✓	✓	10/12/01
9	✓	✓	10/12/01
10	✓	✓	10/12/01
11	✓	✓	10/12/01
12	✓	✓	10/12/01
13	✓	✓	10/12/01
14	✓	✓	10/12/01
15	✓	✓	10/12/01
16	✓	✓	10/12/01
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26	✓	✓	10/12/01
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28	✓	✓	10/12/01
29	✓	✓	10/12/01
30	✓	✓	10/12/01
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46	✓	✓	10/12/01
47	✓	✓	10/12/01
48	✓	✓	10/12/01
49	✓	✓	10/12/01
50	✓	✓	10/12/01

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

571
 03/05/02
 10/26/01